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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/671,065	09/28/2000	Michael Anthony Perez	AUS9-2000-0452-US1 7603	
35525 7	590 12/05/2003		EXAMINER	
DUKE W. YEE			VO, TIM T	
CARSTENS, YEE & CAHOON, L.L.P. P.O. BOX 802334			ART UNIT	PAPER NUMBER
DALLAS, TX 75380			2189	
			DATE MAILED: 12/05/2003	

Please find below and/or attached an Office communication concerning this application or proceeding.

) *	Application No.	Applicant(s)
	09/671,065	PEREZ, MICHAEL ANTHONY
Int rview Summary	Examiner	Art Unit
	Tim T. Vo	2189
All participants (applicant, applicant's representative, PTC	personnel):	
(1) <u>Tim T. Vo</u> .	(3)	
(2) Kevin Goodsell .	(4)	
Date of Interview: 02 December 2003.		
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant	2) applicant's representat	ive]
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.	
Claim(s) discussed: 1.		
Identification of prior art discussed: Anderson et al. 6,338	<u>.119</u> .	
Agreement with respect to the claims f)☐ was reached.	g)⊠ was not reached. h)□] N/A.
Substance of Interview including description of the general reached, or any other comments: Examiner refers to column to reject claim limitation as being "PCI to PC" A Peripheral Component Interconnect" constitute of. The applicant's remarks in the following office action. (A fuller description, if necessary, and a copy of the amenallowable, if available, must be attached. Also, where no	mn 2 lines 17 "A Peripheral C I bridge". Since Anderson do refore, examiner will reconside adments which the examiner a	Component Interconnect or PCI bes not further discuss, what is der this limitation through the agreed would render the claims
allowable is available, a summary thereof must be attached	ed.)	t would relider the claims
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OF FORM, WICHEVER IS LATER, TO FILE A STATEMENT (Summary of Record of Interview requirements on reverse	re last Office action has alrea R THE MAILING DATE OF T OF THE SUBSTANCE OF THE	dy been filed, APPLICANT IS HIS INTERVIEW SUMMARY
	Um	, Co
Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.		gnature, if required

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